Congratulatory Letter Form (Please type or print)

| Person who is requesting letter: | If different, person who will receive letter: |
|----------------------------------|--|
| Name | Name |
| Street | Street |
| City State Zip | City State Zip |
| Telephone | Telephone |
| | at least two weeks prior to the date requested. con, D.C. office may be delayed due to security |
| Please Give a Brief Descrip | otion of the Special Occasion Below: |
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Please return completed form to: Office of Senator Johnny Isakson ATTN: Martha Gilland United States Senate Washington, DC 20510 Or fax to: (202) 228-0724